

THIRTY-EIGHTH
ANNUAL REPORT

OF THE

Bourne Rural District,

FOR THE YEAR 1910,

BY

JOHN GALLETTY,

M.A. ; M. B., C. M. (Edin.),

D.P.H. (Cambridge),

MEDICAL OFFICER OF HEALTH ;

AND


WILLIAM. J. BUDDS,

CERT. & ASSOC. ROYAL SAN. INST.,

INSPECTOR OF NUISANCES.

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Bourne Rural Sanitary District,
FOR THE YEAR 1910.

TO THE BOURNE RURAL DISTRICT COUNCIL.

Gentlemen,

In presenting my Annual Report for the year 1910, I have to request your attention to several important matters which, I have no doubt, will receive due consideration in the coming year.

We may congratulate ourselves that Sanitary matters have received a fair share of your attention, without giving rise to any heated discussions, such as, unfortunately, have occurred in previous years. This is, doubtless, due to the fact that the Council, as a whole, are becoming more and more convinced that Rural Sanitation, in its widest aspect, is a most important subject, which should be dealt with in a wise and far-reaching manner, and that the necessary reforms can only be carried through at considerable cost to private owners and the rate-paying community.

The year 1910 will be remembered as the year in which the Housing, Town Planning, &c. Act, 1909 came into force. This Act makes it obligatory on all Rural District Councils to cause a house-to-house inspection of their district to be made and to see that a Register of all the houses, considered to be dangerous or injurious to health, is kept, in which is set out, in more or less detail, all the defects found on inspection and an account of the work done to remedy these defects. In course of time this register will become a most valuable storehouse of information as regards the cottage property of the whole district. This Act has considerably strengthened the hands of your officers, as what was previously considered officiousness on their part has now been stamped with the approval of the Local Government Board.

Perhaps what will strike this Council as the most important part of the above mentioned Act is the provision by Rural District Councils of working-class dwellings. Where a Rural District Council fails to exercise its powers under the Housing Acts, in

cases where such powers ought to have been exercised, a Complaint may be made to the Local Government Board by the County Council, or by the Parish Council or Parish Meeting of any parish in the district, or by four inhabitant householders of the district. So far as this Council is concerned there appears to be little likelihood of any such appeal to headquarters being required, as your officers have quite recently received instructions to prepare a list of the most insanitary houses in the district with a view to their closure and demolition, if necessary, and the possible utilization of their sites on which to erect working-class dwellings. Already a site has been selected in Little Bytham for the erection of six cottages.

Plans for the construction of these houses have not yet been submitted to the Council, and it is, therefore, too early to state what they are going to cost and what rent the tenants will have to pay. It is only fair to the owners of cottage property and to the rate-payers that the new cottages to be built by the Council should be let at such a rent as will repay, if possible, the interest on the borrowed money. However, if it be found that substantially-built cottages, with the necessary conveniences, cannot be built without some assistance from the rates it will still be the duty of the Council to provide such cottages; and the gain to the public health and general well-being of the community will have to be considered a sufficient recompense for the money thus spent. We hear so much at present of Associations for promoting rural welfare and for improving rural education that it should hardly be necessary to point out how much the decrease and deterioration of our rural population are due to the lack of decent housing accommodation. If we are earnest in our desires to increase the rural population of this Country, and to promote its happiness, we must see that the people have healthy homes—houses with dry walls and bedrooms with sufficient cubic space, and sufficient window space to admit both light and fresh air, with a water supply above suspicion, and satisfactory drainage, with wash-house where the necessary washing may be done without interfering with the comfort of the inmates of the house. In my opinion the provision of a well-lighted and ventilated larder and a suitable wash-house is more important than the usual front

parlour with its collection of furniture, pictures, photographs, curtains, plants, and gineracks of all descriptions—a room so crowded as to be of no use to its owners, but forming a lodging place for dust and germs of all varieties. If sanitary homes were provided for the working classes, and if simple lessons in domestic hygiene were given in the elementary schools of the country, and means were taken to enforce greater cleanliness of the school children, we should soon see an improvement in the physique and general well-being of the rural population.

The Water-supply of the district has received a good deal of your attention during the past year. Deeping St. James, Langtoft, Baston, Rippingale, and Folkingham, are still badly supplied with good drinking water. Surface wells in these parishes are the chief sources of supply and are liable to pollution. Even there, however, we see a gradual improvement, as the more seriously polluted wells are being closed and fresh ones, in better situations, are being made. A scheme for providing Deeping St James with an abundant supply of pure water was proposed by your officers but failed to meet with your approval, owing to the opposition of Deeping St. James Parish Council. Suggestions were made that the owners of the various houses, which have either no water supply, or only a polluted one, should provide a satisfactory water supply, but as this could not be done at a reasonable cost the whole question is at present in abeyance. However, something will have to be done in the near future to remedy this unsatisfactory state of things.

Artesian bores have been sunk on the Crown's small holdings in Sempringham, and at a farm in Horbling Fen. In Swinstead an abundant supply of pure spring water has been laid on to the houses of the Earl of Ancaster's tenants, and there is every probability of the pipes being extended by this Council to the remainder of the village.

The drainage of most of the villages is unsatisfactory. Open ditches receive in too many cases the contents of the house drains and thereby become converted into sewers. In Langtoft there is a very offensive sewer ditch which ought to receive your attention. The drainage of Billingborough is very unsatisfactory—the sewers being most insanitary, and their contents escaping

into, and polluting the North Beck. There is some prospect of this matter being attended to in the near future. At Corby, the river Glen receives the untreated sewage of the greater part of the village, and at Little Bytham the same river is similarly polluted. This question of the Corby sewage has been before you on several occasions but a satisfactory solution has not yet been reached, owing to the cost of the proposed schemes. At Market Deeping and Deeping St. James the river Welland is polluted by the sewage of these villages.

The privy and closet accommodation of the district has been much improved during recent years. New privies, built in accordance with your bye-laws, with properly cemented vaults above the ground level, or pan-closets, have been erected wherever the existing accommodation has been found insanitary. During the past year, 74 dilapidated and insanitary privies have been abolished, and their places taken by 58 earth closets, 45 pan closets, and 5 water closets. In addition to this, 88 privies have been repaired in various ways. In the whole district the approximate numbers of the various types of closet are—Midden privies 1760, earth closets 270, pan closets 550, water closets 110. The removal of house refuse and the cleansing of earth closets, privies, ashpits, and cesspools are provided for by means of by-laws, but in no case, unfortunately, is systematic removal undertaken by the Council.

Dairies and Cowsheds. I have again to call your attention to the unsatisfactory condition of many of the dairies and cowsheds—more particularly the cowsheds, in this district. Comparatively few cow-keepers and dairymen are registered, as they plead exemption on the ground that they only make or sell butter and cheese, or sell milk in small quantities to their own workmen or neighbours. A good deal of prejudice has to be overcome before some members of the Council will admit the advisability of insisting on all dairies and cowsheds being made to comply with the official provisions for the lighting, ventilation, air-space, cleansing, drainage, and water-supply of the premises. This question of improved Cowsheds is intimately associated with the larger question of Bovine Tuberculosis, which is engaging public attention both on its own account, as causing

a serious loss to farmers, and as a factor in the spread of Tuberculosis to human beings by means of the milk and flesh of tuberculous cattle. The Board of Agriculture issued a Tuberculosis (Animal) Order in May, 1909, which was to have come into force in January 1910, but this Order was withdrawn with a view to its subsequent re-introduction at a more favourable opportunity, when the next Milk Bill is before Parliament.

Slaughterhouses.—These have been frequently inspected and have generally been found satisfactory. Owing to the extent of the Rural District and the number of slaughterhouses systematic inspection of meat, at the time of slaughter, is an impossibility.

A glance at the figures contained in the Report of the Sanitary Inspector will be sufficient to show that his zeal in searching for and remedying insanitary conditions remains as keen as in former years. However, in a wide district, such as this is, it will take some years before even the most conspicuous sanitary defects have been adequately remedied.

The tables of Statistics annexed call for some explanation.

Table I. gives the vital statistics for the whole district for 1910 and the ten previous years.

The number of births is 343, being 28 more than in 1909, and 33 more than in 1908. This gives a birth-rate of 28·3—the highest birth-rate during the past ten years. In rural England the birth-rate is 25.

The number of deaths, belonging to the Bourne Rural District, amounts to 192 being 2 less than occurred in 1909. This means a death-rate of 15·8, exactly the same as last year. The death-rate for rural England is 13·6.

The number of deaths of children, under 1 one year, is 28, being 20 fewer than occurred in 1909, and 5 more than occurred in 1908. The Infantile death rate is therefore, 81, whereas the corresponding figure for rural England is 96.

Compared with rural England, we have a high birth rate and a low Infantile death rate—facts which speak well for this district.

Table II. gives the vital statistics for each of the four districts into which the Bourne District is divided.

The death rate, at all ages, for these districts varies as follows: 14·1 for Aslackby, 17·9 for Bourne Rural, 14·3 for Corby and 17·1 for Deeping. The Infantile death rate varies less than it did in

1909—being 80·3 for Aslackby, 103·8 for Bourne Rural, 54 for Corby, and 87·5 for Deeping. The birth rate is 29·3 for Aslackby, 30·1 for Bourne Rural, 30·4 for Corby, and 24·1 for Deeping. The same remark applies to the birth rate as to the Infantile death rate—it varies less in the different districts than it did last year.

Table III. gives the cases of Infectious disease notified during 1910.

There were 30 cases notified during 1910—1 less than last year, which was stated in my last year's report to be the smallest number notified in any year since notification of Infectious Disease became compulsory in 1892. However, as the 1909 list included 5 cases of voluntary notification of Pulmonary Tuberculosis, whereas no cases of the latter have been notified in 1910, we must still regard 1909 as the year in which fewest cases of compulsory notifiable diseases occurred. We might congratulate ourselves on the fact that no cases of Pulmonary Tuberculosis had been notified, were it not that we know several cases of this disease did occur and failed to be notified, owing to its notification being only voluntary on the part of the public and the medical men in attendance.

As a Council we have sought to make the notification of Pulmonary Tuberculosis compulsory, but the Local Government Board have not seen their way to accede to our request, and voluntary it must remain for the present. As the public become more enlightened on the subject of Tuberculosis and realise the benefits obtained by early treatment, and the great dangers of its infecting other inmates of the house in its later stages, they will insist on more energetic measures being taken to try and eradicate this dread disease—compulsory notification will then be the first step taken. Removal of early cases to Sanatoriums and of late cases to Special Hospitals will follow, as soon as the State provides adequately for compulsory invalidity insurance, as it will then realise more fully how much of the nation's chronic ill-health is due to Tuberculosis in its various forms. Signs are not wanting that the education of the public in this direction will proceed more rapidly in the near future.

The Infectious cases in 1910 consisted of 4 cases of Diphtheria—the lowest number on record in this district—6 cases of Erysipe-

las, 18 cases of Scarlet fever, 1 case of Enteric fever, and 1 case of Puerperal fever. One of the Diphtheria cases proved fatal—all the other cases of Infectious disease having recovered. Of the 18 cases of Scarlet fever, 16 cases occurred in the parishes of Creeton and Little Bytham, which have a joint school, from which place the infection was disseminated. Two of the Diphtheria cases and 12 of the Scarlet fever cases were removed to Hospital—showing a more general adoption of Hospital treatment for these infectious cases.

The Schools at Thurlby, Swinstead, Corby, and Dowsby were closed for periods varying from 2 to 4 weeks, owing to epidemics of Measles; Edenham school was closed for 11 days owing to epidemic of chicken-pox, while Little Bytham Council school was closed from 29th November till the end of December, owing to epidemic of Scarlet fever. The schools are closed, sometimes on the recommendation of the school medical officer, and sometimes by request of the medical officer of health, but in all cases the medical officer of health is informed of the closure of the school by the school medical officer, so that he is kept informed of the various epidemics of disease which occur in his district.

Table IV. gives causes of, and ages at, death during 1910. The total number of deaths is 192—2 fewer than in 1909. Cancer accounted for 13 deaths, compared with 16 in 1909, 21 in 1908, and 16 in 1907. For the fourth year in succession the Aslackby and Deeping districts have more than their due share of deaths from this disease—the figures being 5 for Aslackby, and 4 for Deeping, whereas Bourne Rural and Corby have only 2 each. If we take the numbers for the last 4 years we get 24 deaths from Cancer in the Aslackby district, 23 deaths in the Deeping district, 10 deaths in the Bourne Rural, and 9 in the Corby district. In proportion to population Bourne (Rural) district ought to have had 16 deaths, and Corby district 15 deaths if this disease had been equally prevalent in all four districts. .

The deaths from Tubercular diseases are exactly the same as in 1909, viz, 13. Aslackby had 3 deaths, Bourne (Rural) 2 deaths, Corby 2 deaths and Deeping 6 deaths. Deeping continues to provide the greatest number of deaths from Tubercular diseases. If we take the last 5 years we find the As-

lackby district has 15 deaths from Tubercular diseases, Bourne (Rural) has 12 deaths, Corby has 14 deaths, whereas Deeping has 28 deaths. These figures show that the Deeping district, with a smaller population than the Aslackby district, has nearly twice as many deaths from Tubercular diseases. There is no doubt that overcrowding is a more frequent occurrence in the Deeping district, and this is one of the most potent factors in the causation and spread of Tubercular diseases. When the Council has provided the necessary number of workmen's dwellings in the Deeping district it will be an easier matter for your officers to prevent such overcrowding as has been allowed to continue in the past, owing to the impossibility of finding accommodation for the displaced inmates.

The number of deaths from diseases of the respiratory organs, other than Tuberculosis, is 37, as compared with 29 in 1909, and 23 in 1908.

Heart diseases caused 23 deaths—the same number as in 1909.

Measles gave rise to 2 deaths, compared to 5 deaths in 1909, and Whooping Cough caused only 1 death, compared to 3 deaths in 1909.

The Zymotic death rate of this district is .33, whereas that for rural England is .74.

Table V. gives the Infantile Mortality in 1910.

There were only 28 deaths in children under 1 year, compared with 48 deaths in 1909. The Infantile death rate is 81.6, whereas for rural England it is 96. If we take the numbers for the last 5 years, we find the Infantile Mortality for this district is 95.6, which compares favourably with most districts, if a similar period be taken.

Premature birth accounts for 8 deaths. Convulsions and Bronchitis 4 each, Gastritis and Atrophy 3 each. 12 deaths occurred in the first month of life.

A review of these tables shows that in point of birth rate, Infantile mortality, Zymotic death rate, and general death rate this district will bear comparison with most other districts similarly situated.

I remain, Gentlemen,

Your obedient Servant,

JOHN GALLETLY,

Medical Officer of Health.

Bourne, 11th February, 1911.

TABLE I.
BOURNE RURAL DISTRICT.
Vital Statistics of whole District during 1910 and previous Years.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT				TOTAL DEATHS IN PUBLIC INSTITU- TIONS IN THE DISTRICT.	Deaths of Non- residents registered in Public Institu- tions in the District.	Deaths of Residents registered in Public Institu- tions beyond the District.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
		Number.	Rate*	Under 1 year of Age.		At all Ages.					Number.	Rate.*
				Number.	Rate per 1,000 Births registered	Number.	Rate.*					
1	2	3	4	5	6	7	8	9	10	11	12	13
1900	15,229	360	23·6	33	91·6	206	13·5					
1901	13,401	350	26·1	39	111·4	192	14·3					
1902	13,322	312	23·4	41	128·2	202	15·1					
1903	13,353	351	26·2	52	148·1	197	14·7					
1904	13,367	350	26·1	38	108·5	193	14·4					
1905	13,332	390	22·3	31	104·0	186	13·9					
1906	13,359	342	25·5	28	81·8	203	15·1					
1907	12,464	300	24·0	25	83·3	183	14·6			19	202	16·2
1908	12,348	310	25·1	23	74·2	186	15·0			17	203	16·4
1909	12,232	315	25·7	48	152·3	181	14·7			13	194	15·8
Averages for years 1900-1909	13,240	338	24·8	35·8	108·3	192·9	14·5					
1910	12,118	343	28·3	28	81·6	169	13·9			23	192	15·8

* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.
At Census 1901—Total population at all ages, 13,212. Number of inhabited houses, 3097.
Average number of persons per house, 4·26.

Area of District in acres (exclusive of area covered by water), 78,573.
Institutions outside the District receiving sick and infirm persons from the District:—BOURNE UNION WORKHOUSE,
KESTEVEN COUNTY ASYLUM, PETERBOROUGH INFIRMARY, STAMFORD INFIRMARY.

TABLE II.
BOURNE RURAL DISTRICT.
Vital Statistics of Separate Localities in 1910 and Previous Years.

NAMES OF LOCALITIES.		I.—ASLACKBY.				2.—BOURNE RURAL.				3.—CORBY.				4.—DEEPING.			
YEAR.		Population esti- mated to middle of each year.	Births regis- tered.	Deaths at all ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.
		<i>a.</i>	<i>b.</i>	<i>c.</i>	<i>d.</i>	<i>a.</i>	<i>b.</i>	<i>c.</i>	<i>d.</i>	<i>a.</i>	<i>b.</i>	<i>c.</i>	<i>d.</i>	<i>a.</i>	<i>b.</i>	<i>c.</i>	<i>d.</i>
1900	..	5906	105	52	8	1386	70	53	10	3727	82	45	7	4210	103	56	8
1901	..	4082	104	56	13	2875	76	40	8	2871	85	44	10	3569	85	52	8
1902	..	4060	96	60	12	2865	69	40	7	2858	71	43	11	3539	76	59	11
1903	..	4050	98	59	10	2868	83	49	14	2869	72	39	10	3566	98	50	18
1904	..	4064	100	53	10	2873	74	43	7	2865	89	38	10	3565	87	59	11
1905	..	4058	96	58	8	2870	69	27	4	2855	55	44	10	3549	78	57	9
1906	..	4065	90	47	7	2895	87	41	6	2858	80	44	8	3541	85	71	7
1907	..	3882	85	57	5	2644	71	42	5	2563	60	47	10	3382	84	56	6
1908	..	3858	97	63	10	2613	73	49	5	2521	67	36	4	3356	73	55	5
1909	..	3840	77	51	14	2585	89	49	11	2483	57	34	9	3337	92	60	14
Averages of Years 1900 to 1909		4186	94	55	9	2647	76	43	7	2847	71	41	8	3561	86	57	9
1910	..	3819	112	54	9	2556	77	46	8	2434	74	35	4	3315	80	57	7

TABLE III.
BOURNE RURAL DISTRICT.
Cases of Infectious Disease notified during the year 1910.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.							TOTAL CASES NOTIFIED IN EACH LOCALITY.				No. of Cases removed to Hospital from each locality				Total Cases re- moved to Hos- pital.	
	At all Ages.	At Ages—Years.						Aslackby.	Bourne Rural.	Corby.	Deeping.	Aslackby.	Bourne Rural.	Corby.	Deeping.		
		Under 1	1 to 5	5 to 15	15 to 25	25 to 65	65 and up-wards										
Small-pox																	
Cholera																	
Diphtheria (including Membranous croup) ..	4	..	1	1	..	2	..	2	..	..	2	1	..	..	1	2
Erysipelas	6	..	..	..	..	3	3	1	..	3	2					
Scarlet Fever	18	..	5	10	1	2	..	..	1	16	1	..	1	10	1	12
Typhus Fever																	
Enteric Fever	1	..	1	..	..	..	..	..	..	1						
Relapsing Fever																	
Continued Fever																	
Puerperal Fever	1	..	..	..	..	1	..	..	..	1						
Plague																	
Totals	30	..	7	11	1	8	3	3	1	21	5	1	1	10	2	14	

ISOLATION HOSPITAL—STAMFORD HOSPITAL.
Number of Diseases that can be concurrently treated—3.

TABLE IV.
BOURNE RURAL DISTRICT.
Causes of, and Ages at, Death during 1910.

CAUSES OF DEATH.	DEATHS IN WHOLE DISTRICT AT SUBJOINED AGES.							DEATHS IN LOCALITIES (AT ALL AGES).				In BOURNE WORKHOUSE.
	All Ages	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and up- wards.	Asl'ekby	Bourne.	Corby.	Deeping	
Small-pox												
Measles	2	..	2	..	..	..	..	..	2	..	..
Scarlet Fever												
Whooping-cough	1	1	..	..	..	..	..	..	1	..	..
Diphtheria (including Membranous croup) ..	1	..	1	..	..	..	..	1	..	..	..
Croup												
Fever { Typhus												
Enteric.. ..												
Other continued												
Epidemic influenza	2	..	1	..	..	..	1	..	1	1	..	
Cholera												
Plague												
Diarrhoea (See notes at back.)												
Enteritis. (See notes at back.)	4	2	..	..	..	..	2	3	1	..	..
Gastritis. (See notes at back.)												
Puerperal fever. (See notes at back.)												
Erysipelas												
Phthisis, (Pulmonary Tuberculosis.)	10	..	..	1	2	6	1	2	2	2	4	
Other tuberculous diseases	3	..	..	..	2	1	..	1	..	..	2	
Cancer, malignant disease. (See notes at back.)	13	..	..	..	1	5	7	5	2	2	4	
Bronchitis	20	4	1	..	..	2	13	5	7	2	6	
Pneumonia	15	1	2	1	..	4	7	2	2	4	7	
Pleurisy	2	..	..	..	..	..	2	..	..	..	2	
Other diseases of Respira- tory organs.												
Alcoholism {												
Cirrhosis of liver { ..	1	..	..	..	..	1	..	..	1	..	..
Venereal diseases	1	1	..	..	..	..	..	..	..	1	..	
Premature Birth	8	8	..	..	..	..	..	4	..	1	3	
Diseases and accidents of parturition	3	..	..	..	1	2	..	1	..	..	2	
Heart diseases	23	..	1	..	..	7	15	7	7	2	7	
Accidents	3	..	..	..	1	1	1	..	1	1	1	
Suicides												
Convulsions, Infantile ..	2	2	..	..	..	..	..	..	1	1	..	
Kidney Diseases	6	..	..	..	..	2	4	1	2	3	..	
Atrophy, Infantile.. ..	1	1	..	..	..	..	..	..	1	..	..
All other causes	71	8	2	3	3	10	45	22	15	15	19	
All causes	192	28	10	5	10	41	98	54	46	35	57	

NOTES.—

- (a) In Table IV., all deaths of "Residents" occurring in public institutions, whether within or without the district, are to be *included* with the other deaths in the columns for the several age groups (columns 2-8). They are also, in columns 9-15, to be *included* among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars. Deaths of "Non-residents" occurring in public institutions in the district are in like manner to be *excluded* from columns 2-8 and 9-15 of Table IV.
- (b) See notes on Table I. as to the meaning of "Residents" and "Non-Residents," and as to the "Public Institutions" to be taken into account for the purposes of these Tables. The "Localities" in Table IV. should be the same as those in Tables II. and III.
- (c) All deaths occurring in public institutions situated within the district, whether of "Residents" or of "Non-Residents," are, in addition to being dealt with as in note (a) to be entered in the last column of Table IV. The total number in this column should equal the figures for the year in column 9, Table I.
- (d) The total deaths in the several "Localities" in columns 9-15 of Table IV. should equal those for the year in the same localities in Table II., sub-columns c. The total deaths at all ages in column 2 of Table IV. should equal the gross total of columns 9-15, and the figures for the year in column 12 of Table I.
- (e) Under the heading of "Diarrhœa" are to be included deaths registered as due to Epidemic diarrhœa, Epidemic enteritis, Infective enteritis, Zymotic enteritis, Summer diarrhœa, Dysentery and Dysenteric diarrhœa, Choleraic diarrhœa, Cholera (other than Asiatic or epidemic), and Cholera Nostras.
- Deaths from diarrhœa secondary to some other well-defined disease should be included under the latter.
- Deaths from Enteritis, Muco-Enteritis, Gastro-Enteritis, and Gastritis (see under the heading Diarrhœal Diseases in Table V.) in Tables IV. and V. should be placed immediately below, but separately from, those enumerated under the heading Diarrhœa as defined by enumeration above. This is particularly important for deaths under one year of age, as many of the deaths in infancy returned as due to Enteritis are really caused by Epidemic Diarrhœa. In the course of years, by the adoption of this recommendation, it will be practicable to ascertain the probable amount of transfer between these different headings.
- (f) Under the headings of "Cancer" and "Puerperal fever" should be included all registered deaths from causes comprised within these general terms. Thus: Under "Cancer" should be included deaths from Cancer, Carcinoma, Malignant disease, Scirrhus, Epithelioma, Sarcoma, Villous tumour, and Papilloma of bladder, Rodent ulcer. Under "Puerperal Fever" are to be included deaths from Pyæmia, Septicæmia, Sapræmia, Pelvic peritonitis, Peri- and Endo-Metritis occurring in the Puerperium.
- (g) Under "Congenital Defects" in Table V. are to be included deaths from Atelectasis, Icterus neonatorum, Navel hæmorrhage, Malformations and Congenital hydrocephalus.
- (h) Under "Tuberculous Meningitis" are to be included deaths from Acute hydrocephalus.
- (i) Under "Other Tuberculous Diseases" are to be included deaths from Tuberculosis, Tuberculosis of bones, joints and other organs, Lupus and Scrofula.
- (j) All deaths certified by registered Medical Practitioners and all Inquest cases are to be classed as "Certified"; all other deaths are to be regarded as "Uncertified."

In recording the facts under the various headings of Tables I., II., III., IV., and V., attention has been given to the notes on the Tables.

JOHN GALLETLY,
Medical Officer of Health.

11th February, 1911.

TABLE V.
BOURNE RURAL DISTRICT.
INFANTILE MORTALITY DURING THE YEAR 1910.
Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.		Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under One Year.
All Causes.	Certified	9	2	..	1	12	4	2	4	2	..	2	..	1	1	28
	Uncertified																	
Common Infectious Diseases.	Small-pox																	
	Chicken-pox																	
	Measles																	
	Scarlet Fever																	
	Diphtheria (including Membranous Croup)																	
Diarrhœal Diseases.	Whooping Cough	1	1
	Diarrhœa, all forms																	
	Enteritis, Muco-enteritis, Gastro-enteritis																	
	Gastritis, Gastro-intestinal Catarrh .. ..	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..
	Premature Birth	6	..	..	1	7	1	..	..	..	..	..	..	..	..	..	..
Wasting Diseases.	Congenital Defects	1	8
	Injury at Birth	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
	Want of Breast-milk, Starvation																	
	Atrophy, Debility, Marasmus .. ..	..	1	..	..	1	..	1	..	1	..	..	..	..	..	..	..
	Tuberculous Meningitis																	
Tuberculous Diseases.	Tuberculous Peritonitis																	3
	Tabes Mesenterica																	
	Other Tuberculous Diseases																	
	Erysipelas																	
	Syphilis	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
Other Causes.	Rickets																	1
	Meningitis (not Tuberculous)	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..
	Convulsions	1	..	..	..	1	2	..	..	..	..	1	..	..	..	..	..
	Bronchitis .. ..	..	..	..	..	..	1	1	1	..	..	..	..	1	..	..	..
	Laryngitis .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Pneumonia	1	1	1
	Suffocation, overlying Other Causes																	
TOTALS ..		9	2	..	1	12	4	2	4	2	..	2	..	1	1	28

Population estimated to middle of 1910—12,118. Births in the Year—Legitimate, 320 ; Illegitimate, 23.
Deaths in the Year—Legitimate, 26 ; Illegitimate, 2. Deaths from all Causes at all Ages—192.

Annual Report of the Medical Officer of Health for the year 1910, for the Rural District of Bourne,
(Lincs.), on the administration of the Factory and Workshop Act, 1901, in connection with
FACTORIES, WORKSHOPS, WORKPLACES, AND HOMEWORK.

1.—INSPECTION OF FACTORIES, WORKSHOPS, AND WORKPLACES.

Including Inspections made by Sanitary Inspector or Inspector of Nuisances.

Premises.				Number of	
				Inspections.	Written Notices.
Workshops	...	...	...	318	15
Workplaces	...	...	...	43	
Total				361	15

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS, AND WORKPLACES.

Particulars.				Number of Defects.	
				Found.	Remedied.
<i>Nuisances under the Public Health Acts—</i>					
Want of cleanliness	...	...	...	10	10
Want of ventilation	...	...	...	1	1
Want of drainage of floors	...	...	...	2	2
Other nuisances	...	...	...	5	5
Sanitary accommodation unsuitable or defective	...	...	...	1	1
Totals				19	19

4.—REGISTERED WORKSHOPS.

Workshops on the Register, (s. 131) at end of the Year.				Number.
Bakehouses	...	...	...	42
Blacksmiths	...	...	...	24
Carpenters and Joiners	...	...	...	19
Saddlers	...	...	...	10
Shoemakers	...	...	...	12
Tailors	...	...	...	11
Miscellaneous	...	...	...	27
Total number of workshops on Register				145

JOHN GALLETLY,
Medical Officer of Health.

11th February, 1911.

❖ BOURNE RURAL DISTRICT COUNCIL. ❖

ANNUAL REPORT

OF THE

INSPECTOR OF NUISANCES.

MR. CHAIRMAN AND GENTLEMEN,

I have much pleasure in presenting to you my Annual Statement, and particulars of the Sanitary Work executed under your authority, for the year ending 31st December, 1910.

INSPECTIONS.

No. of House-to-house inspections ...	...	389
„ Works in progress inspected ...	...	414
„ Cowsheds and Dairies „	...	170
„ Slaughterhouses „	...	263
„ Workshops „	...	311
„ Schools „	...	16
„ Petrol Stores „	...	12
„ New Houses „	...	10
„ Common lodging houses „	...	4
„ Premises inspected on Complaint ...		71
„ Appointments with owners, agents, &c.		248
„ Inspections and visits on occurrence of Infectious Disease ...		97
„ Re-inspections, and visits to premises not included in the above • ...		753
Total ...		<u>2758</u>

Results of the above inspections, &c., and the clerical work incidental thereto :—

No. of Insanitary conditions, and contra-		
ventions of Regulations, By-laws, &c.	1079	
„ „ abated or remedied	1280	...
„ Letters and reports to owners, &c.	636	...
„ Statutory notices served	34	...
„ „ „ complied with	32	...
„ Summons ordered, for non-compliance*	1	
„ Certificates for new houses issued	5	...

(*This summons was ordered near the close of the year.)

DESCRIPTION OF WORKS EXECUTED.

No. of Houses cleansed and limewashed	58	...
„ Houses repaired (roofs, floors, &c.)	191	...
„ Houses provided with eaves-gutters		
„ and down-spouting	83	...
„ Rooms provided with means of light		
„ and ventilation	81	...
„ Yards paved with impervious material	109	
„ Houses provided with drains	101	...
„ Insanitary drains remedied	79	...
„ Cesspools constructed	24	...
„ Dilapidated and insanitary midden		
„ privies abolished	74	...
„ Privies, repaired, ventilated, &c.	88	...
„ Water closets constructed	5	...
„ Earth closets „	58	...
„ Pan (or pail) closets constructed	45	...
„ Covered ashpits „	6	...
„ Urinals (at Inns) „	4	...
„ Offensive accumulations removed	202	...
„ Overcrowding cases abated	6	...
Total	1214	...

WATER SUPPLY.

No. of Houses newly supplied by Artesian well ...	8
„ Ordinary wells sunk	2
„ Wells cleansed and repaired	19
„ Wells closed	2

DAIRIES, COWSHEDS AND MILKSHOPS ORDERS.

No. of Persons registered	31
„ Inspections of premises	170
„ Contraventions of Orders remedied, as follows :—	
Unregistered traders, Registered ...	3
Cowsheds cleansed and limewashed ...	21
„ disused as unfit ...	3
„ constructed ...	3
„ provided with means of light	5
„ „ ventilation...	12
„ „ drains ...	11
„ properly paved ...	9
Dairies constructed	2
Wells cleansed	1
„ sunk	1
Artesian wells	1
Accumulations removed	5
Total ...	<u>77</u>

SLAUGHTERHOUSES.

No. on Register	28
No. of Inspections of premises...	263
„ Contraventions of By-laws remedied, as follows :—	
Dirty interiors	9
Defective floors	4
Defective walls	1
Want of drains	3
Accumulations of refuse removed ...	7
Dog kept in slaughterhouse ...	1
Total ...	<u>25</u>

FACTORY AND WORKSHOPS ACTS.

No. of Workshops and Workplaces on Register	...	145
---------------------------------------------	-----	-----

Classified as follows:—

Bakehouses	...	...	...	42
Blacksmiths	...	...	...	24
Carpenters and Joiners	...	...	...	19
Saddlers	...	...	...	10
Shoemakers	...	...	...	12
Tailors	...	...	...	11
Miscellaneous	...	...	...	27
Total				145

The following defects and insanitary conditions were remedied:—

Dirty interiors	...	...	...	10
Want of ventilation	...	...	...	1
„ drainage of floors	...	...	...	2
Other nuisances	...	...	...	5
Defective Sanitary conveniences	...	...	...	1
Total				19

INFECTIOUS DISEASE.

No. of Inspections and visits to premises	...	97
„ Buildings disinfected	...	30

I am, Gentlemen,

Your obedient Servant,

WILLIAM J. BUDDS,

Inspector of Nuisances.

23rd January, 1911.